PART B - FEE(S) TRANSMITTAL

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29052	7590 02/22	2007	have	e its own certificate	of mailing or transmission.	~
SUTHERLAN 999 PEACHTRI ATLANTA, GA	I he Stat addi tran	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
						(Depositor's name)
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/975,672	10/10/2001		Norman F. Sheppard JR.		17509-0019	9452
TITLE OF INVENTION	: MICROCHIP RESERV	OIR DEVICES USING	WIRELESS TRANSMISS	ION OF POWER A	AND DATA	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	05/22/2007
EXAM	INER	ART UNIT	CLASS-SUBCLASS			
GRAY, PHILLIP A		3767	604-890100			
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). □ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2)			
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
). ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or typ	pe)		
PLEASE NOTE: Un recordation as set fort	less an assignee is identi h in 37 CFR 3.11. Comp	ified below, no assignee pletion of this form is NO	data will appear on the part a substitute for filing an	atent. If an assigne assignment.	ee is identified below, the d	ocument has been filed for
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
MicroCHIPS	, Inc.		Bedford, Mas	sachusetts		
lease check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual Co	rporation or other private gro	oup entity Government
la. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)						
Issue Fee Publication Fee (No small entity discount permitted)			A check is enclosed.			
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5. Change in Entity Sta	tus (from status indicated	d above)	overpayment, to Depo	sit Account Number	r 193029 (enclose a	n extra copy of this form).
a. Applicant claim	s SMALL ENTITY state	L ENTITY status. See 37 Cl	FR 1.27(g)(2),			
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Authorized Signature Link			Date 3-21-2007			
Typed or printed nam	eKevin W	. King	Registration No. 42,737			
ubmitting the complete his form and/or suggest 30x 1450, Alexandria, V Alexandria, Virginia 223	d application form to the ions for reducing this but /irginia 22313-1450. DC 113-1450.	USPTO, Time will vary rden, should be sent to the NOT SEND FEES OR	depending upon the indivice Chief Information Office COMPLETED FORMS TO	idual case. Any cor x, U.S. Patent and T THIS ADDRESS.	ne public which is to file (and inutes to complete, includin mments on the amount of tir (rademark Office, U.S. Dept. SEND TO: Commissioner isplays a valid OMB control	g gathering, preparing, and ne you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,